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Bib Data Sheet

CONFIRMATION NO. 7120

SERIAL NUMBER 10/820,224	FILING DATE 04/06/2004 RULE	CLASS 333	GROUP ART UNIT 2817	ATTORNEY DOCKET NO. 12521-3
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\*\* CONTINUING DATA \*\*\*\*\* *am*

*NoNE*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *am*

*NoNE*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/18/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>am</i> Examiner's Signature	CANADA	7	30	4

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## TITLE

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